

Sheet 1 of 2

THIS FORM REPLACES DR FORM 40, JAN 02
PREVIOUS EDITIONS WILL BE DESTROYED

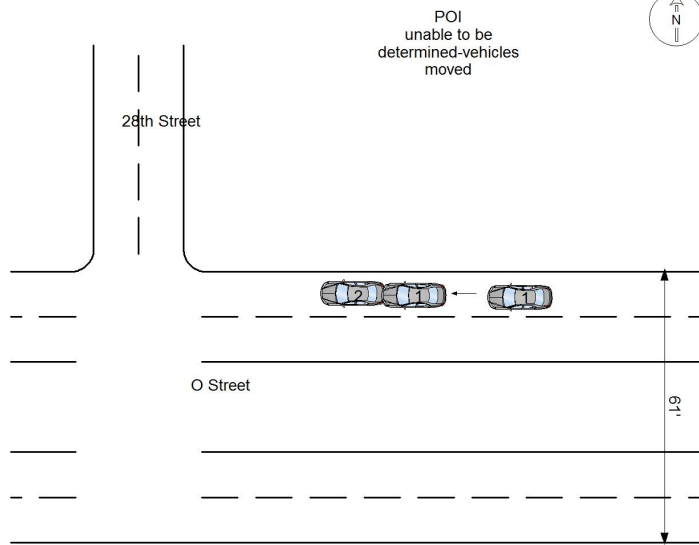
THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B5-085307



Indicate
North
by Arrow



Not To Scale

DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Driver 1 was travelling WB on O Street in the outside lane 29-28th Street at approximately 15 mph. Driver 2 was stopped in traffic on O Street, 29-28th Street in the outside lane. Driver 1 was unable to get stopped and collided with the back of Vehicle 2.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME				PHONE
	NAME				PHONE

VEHICLE MOVEMENT BEFORE COLLISION						POINT OF IMPACT AND MOST DAMAGED AREA <i>(Enter numbers for each vehicle)</i>				AIRBAG DEPLOYED VEHICLE 1		RESTRAINT USE VEHICLE 1		TOTAL OCCUPANTS								
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME	VEHICLE 1		VEHICLE 2														
1				X	O																	
2				X	O																	
1	01	06 Turning left				MOST DAMAGED AREA	01	MOST DAMAGED AREA	05	1 Deployed - front		1 None used - vehicle occupant		ALCOHOL TESTING		Driver No. 1	Driver No. 2	Pedestrian				
2	11	08 Entering traffic lane								2 Deployed - side		2 Lap & shoulder belt used		ALCOHOL LEVEL TESTED		Y	Y	Y				
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> 01 Essentially straight ahead 02 Backing 03 Changing lanes 04 Overtaking/ Passing 05 Turning right </div> <div style="width: 50%;"> 09 Leaving traffic lane 10 Parked 11 Slowing or stopped in traffic 12 Other 13 Unknown </div> </div>						02		03		04		1 Deployed - both front/side		3 Shoulder belt only used		BAC LEVEL						
						01		05		4 Not deployed		4 Lap belt only used		5 Child safety seat used		ALCOHOL/ DRUGS SUSPECTED		Driver No. 1		Driver No. 2		
						08		07		06		5 Not applicable/ No airbag available		6 Costume helmet used		7 DOT approved helmet used		1		1		
												6 Unknown		9 Restraint use unknown		8 Costume helmet used		4 Yes - alcohol & drugs suspected				
OFFICER NO. 1426						TROOP/ TEAM/ BEAT SW			DEPARTMENT Lincoln Police Department										Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
INVESTIGATOR NAME <i>(Print or Type)</i> Megan Schreiner						INVESTIGATOR SIGNATURE Approved by Officer Megan Schreiner						DATE OF REPORT 09/15/2015										